



Mail completed form to:
30-30 47th Avenue, 10th Fl
Long Island City, NY 11101



**Agency Report
WTC Disability Law**

This form is to be completed by the agency whose employee (or former employee) has filed a Notice of Participation with NYCERS indicating that he/she participated in WTC Rescue, Recovery or Clean-Up Operations during certain qualifying periods between September 11, 2001 and September 12, 2002. Please review all of the following questions and provide as much information as possible. When you have completed the form, please send it along with any *relevant supporting documentation* to NYCERS.

Member Number (active or vested)	Pension Number (retiree)	Last 4 Digits of Social Security #

First Name	M.I.	Last Name

Using the attached Notice of Participation for reference, please answer the following questions:

1. Does the employee's personnel record indicate that he/she had a physical examination upon entry into public service? Y N

2. Participation in WTC Rescue, Recovery or Clean-Up Operations

The WTC law specifies various locations and activities, as well as different qualifying periods. Please answer the questions [(A), (B), or (C)] that correspond with the information contained in the Notice of Participation filed by the member, vested member, retiree or eligible beneficiary.

(A) Can you confirm that the member/vested member/retiree:

- i) Participated in WTC Rescue, Recovery or Clean-Up Operations at the WTC site, the Fresh Kills Land Fill, the NYC Morgue or the temporary morgue on the pier locations on the west side of Manhattan, or on the barges operating between the west side of Manhattan and the Fresh Kills Land Fill; and Y N
- ii) Participated in such operations at one or more of these locations for any period of time during the 48 hours after the first airplane hit the towers or at least a total of 40 hours between September 11, 2001 and September 12, 2002? Y N

(B) Can you confirm that the member/vested member/retiree:

- i) Participated in WTC Rescue, Recovery or Clean-Up Operations by repairing, cleaning or rehabilitating vehicles or equipment, including emergency vehicle radio equipment, owned by the City of New York and contaminated by debris at the WTC site, regardless of where the work was performed; and Y N
- ii) Participated in such operations for any period of time during the 48 hours after the first airplane hit the towers or at least a total of 40 hours between September 11, 2001 and September 12, 2002? Y N



Mail completed form to:
 30-30 47th Avenue, 10th Fl
 Long Island City, NY 11101

Member Number	Pension Number	Last 4 Digits of SSN

(C) For the following communication/dispatcher titles in the NYC Police Department or NYC Fire Department only:

Department	Locations	Titles
New York City Police Department	11 MetroTech Center (Brooklyn) or 1 Police Plaza (Manhattan)	Police Communication Technician (PCT), Supervisor Police Communication Technician (SPCT), Principal Police Communication Technician I, Principal Police Communication Technician II, Principal Police Communication Technician III, Administrative Manager-Communications, or in the Police Administrative Aide title series
New York City Fire Department – Dispatcher titles	35 Empire Boulevard (Brooklyn), 79th Street Transverse (Manhattan), 83-98 Woodhaven Boulevard (Queens), 1129 East 180 Street (Bronx), 65 Slosson Avenue (S.I.), 9 MetroTech Center (Brooklyn) or 25 Rockaway Avenue (Brooklyn)	Fire Alarm Dispatchers (FAD), Supervising Fire Alarm Dispatchers I (SFAD), Supervising Fire Alarm Dispatchers II (Borough Supervisor), Deputy Director and Director of Fire Dispatch Operations or Assistant Commissioner for Communications
New York City Fire Department – EMS titles	1 MetroTech Center (Brooklyn), 9 MetroTech Center (Brooklyn) or 55-30 58th Street (Queens)	Emergency Medical Specialist-Level I (EMT), Emergency Medical Specialist-Level II (Paramedic), Supervising Emergency Medical Specialist-Level I (Lieutenant), Supervising Emergency Medical Specialist-Level II (Captain), Deputy Chief EMS Communications or Division Commander EMS Communications

Can you confirm that the member/vested member/retiree:

- | | | |
|---|---|---|
| i) Participated in WTC Rescue, Recovery or Clean-Up Operations at one of the locations specified in the table; and | Y | N |
| ii) Participated in such operations at one or more of these locations for any period of time during the 24 hours after the first airplane hit the towers? | Y | N |

3. If you answered “No” to any of the above questions [(A), (B), or (C)], please explain why in as much detail as possible:

Signature of Official	Date
Print Name	Phone Number
Title/agency	

PLEASE RETURN THIS COMPLETED FORM ALONG WITH ANY RELEVANT SUPPORTING DOCUMENTATION TO NYCERS.